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Dental Services Handbook Appendices

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Appendix 1
Quick Access Guide to Wisconsin Medicaid Information

**Wisconsin Medicaid Professional Relations
Representatives Map**

Denise Kruswicki
Northwest Wisconsin
(715) 392-3143

Joan Buntin
North Central Wisconsin
(715) 848-7566

David Miess, Director
(608) 221-4746

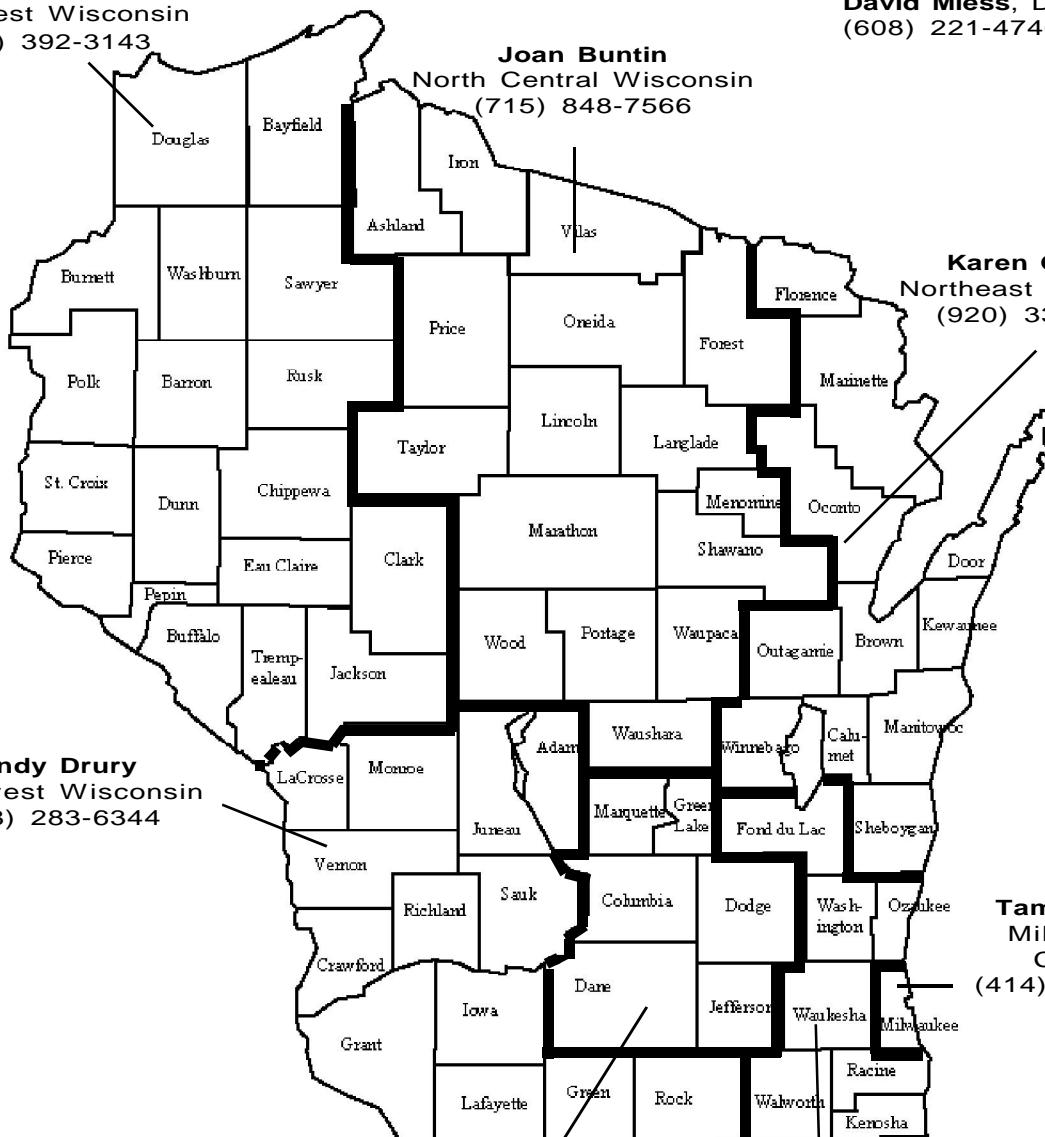
Karen Gordon
Northeast Wisconsin
(920) 336-0527

Cindy Drury
Southwest Wisconsin
(608) 283-6344

Tami Radwill
Milwaukee
County
(414) 273-1773

Jude Benish
South Central Wisconsin
(608) 255-8521

Vicky Murphy
Southeast Wisconsin
(414) 963-8966



Questions from Recipients about Medicaid Eligibility and Services?

Providers may refer recipients who have questions about their Medicaid eligibility to the Recipient Services hotline. This hotline is not for provider use.

- **Recipient Services (*recipient use only*)**
(800) 362-3002
Hours: 8:00 a.m. to 4:30 p.m.,
Monday–Friday

Here's Help!

*A Quick Access Guide for Medicaid
Providers on Wisconsin Medicaid
Information*

Policy/Billing Questions? _____

- **EDS Correspondence Unit for Policy/Billing Information**
(608) 221-9883
(800) 947-9627
Hours: 8:30 a.m. to 4:30 p.m., Monday, Wednesday–Friday
9:30 a.m. to 4:30 p.m., Tuesday
Not available on holidays
- **Stat P.A.**
(for limited services)
(800) 947-1197
(608) 221-2096
Hours: 8:00 a.m. to 9:00 p.m.
Monday–Friday
- **Medicaid Managed Care Contract Monitors**
(800) 760-0001
Hours: 8:30 a.m. to 4:30 p.m., Monday, Wednesday–Friday
9:30 a.m. to 4:30 p.m., Tuesday

Questions about Medicaid Recipient Eligibility? _____

- **The Voice Response System**
(608) 221-4247
Hours: 24 hours a day, seven days a week
Including holidays
- **The Eligibility Hotline**
(608) 221-9254
Hours: 8:30 a.m. to 4:30 p.m., Monday, Wednesday–Friday
9:30 a.m. to 4:30 p.m., Tuesday
Not available on holidays
- **(800) WIS-ELIG (947-3544)**
Hours: 7:30 a.m. to 5:00 p.m.,
Monday–Friday
Not available on holidays

Professional Relations Representatives _____

*for help with complex Medicaid provider questions
(see map on other side)*

- **Milwaukee County**
Tami Radwill
(414) 273-1773
- **North Central Wisconsin**
Joan Buntin
(715) 848-7566
- **Southwest Wisconsin**
Cindy Drury
(608) 283-6344
- **Northwest Wisconsin**
Denise Kruswicki
(715) 392-3143
- **Northeast Wisconsin**
Karen Gordon
(920) 336-0527
- **South Central Wisconsin**
Jude Benish
(608) 255-8521
- **Southeast Wisconsin**
Vicky Murphy
(414) 963-8966

Remember... _____

- ✓ Policy and billing information lines answer policy and billing questions only, including prior authorization information.
- ✓ Check the recipient's Wisconsin Medicaid identification card first to avoid calls to Voice Response and the Eligibility Hotline. Refer to Appendix 31 of Part A, the all-provider handbook, for instructions on how to access Voice Response.
- ✓ 800 phone numbers are toll-free in Wisconsin only.

Post this by your telephone for easy reference.

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Appendix 2 Dental Certification Form

Determining Your Oral Surgery Billing

Wisconsin Medicaid dentists can select the procedure code billing system they want to use for billing all oral surgery codes that do not require a tooth letter or number. Dentists can select either:

- The American Dental Association (ADA) Current Dental Terminology (CDT).
- The *Physicians' Current Procedural Terminology* (CPT).

If you are unsure whether you are certified by Wisconsin Medicaid to bill with CDT codes or CPT codes, please contact Correspondence Unit for Policy/Billing Information at (800) 947-9627.

This document outlines the way that oral surgery procedure code billing is automatically assigned to dentists and provides an opportunity for dentists to choose a different billing system than they are assigned.

Assignment of Oral Surgery Billing

Assignment of oral surgery billing depends on the dental specialty chosen during Medicaid certification. This assignment is necessary because it provides the computers of the Medicaid fiscal agent, EDS, both a systematic way to identify the oral surgery procedure codes a provider can bill and a way to ensure accurate reimbursement.

Specialties Billing CPT Codes for Most Oral Surgeries

Dentists with the following specialties on the certification file are to bill CPT procedure codes for most oral surgeries:

- Oral surgeons.
- Oral pathologists.
- Other dentists selecting CPT code billing (using the attached form).

Specialties Billing ADA CDT Codes for All Oral Surgeries

The following dental specialties are to bill ADA procedure codes for all oral surgeries:

- | | |
|--|---------------------|
| - Endodontic. | - General Practice. |
| - Orthodontics. | - Pedodontics. |
| - Periodontics. | |
| - Oral surgeons/pathologists selecting
ADA code billing (using the attached
form). | |

General Policies Regarding Oral Surgery Billing

All dentists, regardless of specialty:

- Receive the same reimbursement for the same procedures.
- Have virtually the same program limitations, such as prior authorization requirements, for the same procedures.

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- Bill all other dental (non-surgical) procedures using ADA procedure codes and a few Wisconsin Medicaid HCFA Common Procedure Coding System (HCPCS) local procedure codes ("W" codes).
- Must bill for all oral surgeries using the codes assigned at certification or chosen by completing the attached form.
- Cannot temporarily alternate between coding systems, using different procedure codes on different days.
- Can change their oral surgery billing anytime by completing the attached form, "Selecting a Different Oral Surgery Billing Method."

**Oral Surgery Procedure Code Billing
Determined By Provider Certification**

Provider Type and Specialty on EDS File	Procedure Codes Allowed to Bill	Procedure Codes Not Allowed to Bill
Dentist (provider type 27) <i>Specialties</i> <ul style="list-style-type: none"> - Endodontic - General Practice - Oral Surgery/Pathology billing all ADA codes* - Orthodontics - Pedodontics - Periodontics - Prosthodontics 	<ul style="list-style-type: none"> - American Dental Association (ADA) Current Dental Terminology (CDT) and - Local HCPCS or "W" procedure codes 	<ul style="list-style-type: none"> - Any <i>Physicians' Current Procedural Terminology</i> (CPT) codes for oral surgeries
Dentist (provider type 27) <i>Specialties</i> <ul style="list-style-type: none"> - Oral Pathology - Oral Surgery - Any other type of dentist billing CPT oral surgery codes* 	<ul style="list-style-type: none"> - All ADA codes except those noted - Local HCPCS or "W" procedure codes except those noted - Selected CPT codes for selected oral surgeries 	<ul style="list-style-type: none"> - ADA codes 07260, 07285-07999 - Local HCPCS code W7998
Physicians (Provider types 19-20) <i>Specialties</i> <ul style="list-style-type: none"> - All physician specialties 	<ul style="list-style-type: none"> - All ADA codes except those noted - HCPCS codes except those noted - Physicians CPT codes for oral surgeries 	<ul style="list-style-type: none"> - ADA codes 07260, 07285-07999 - Local HCPCS code W7998 - Dental CPT codes for oral surgeries

* Providers who have completed the application for selecting a different oral surgery billing method.

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Appendix 2
Dental Certification Form (cont.)

Selecting a Different Oral Surgery Billing Method

Complete this form if you want to bill with different oral surgery procedure codes than are currently assigned to your dental specialty (refer to chart on previous page). If you are currently certified in Wisconsin Medicaid and do not want to change your oral surgery billing, do not complete this form. If you are applying for certification and wish to choose the alternate method, complete this form and submit with your application.

Send the completed form to: Provider Maintenance, EDS, 6406 Bridge Road, Madison, WI 53784-0006.

Name _____

Address _____

Medicaid

Provider Number (if assigned) _____

Desired Future Effective

Date for Billing Change _____

(Allow two weeks for computer file changes.)

Providers will be notified when the selected specialty is ready for use. Claims submitted with dates of service on or after the effective date in the notice will use the new billing method.

Current Specialty (required, must mark one)

☐ Endodontic

☐ General Practice

☐ Oral Pathology

☐ Oral Surgery

☐ Orthodontics

☐ Pedodontics

☐ Periodontics

☐ Prosthodontics

Oral Surgery Billing Specialties

Indicate the specialty that you choose, based on your choice of procedure codes for oral surgery billing. (Do not complete if you are satisfied with the oral surgery billing codes assigned to your specialty.) **NOTE:** *If you are a member of a group, encourage all members of the group to use the same oral surgery billing method.*

☐ Oral surgeons/pathologists billing ADA codes for all oral surgeries

☐ Any other dental specialty choosing CPT oral surgery billing

Signature

Date

(**NOTE:** On the fiscal agent's computer files, your oral surgery billing specialty will be listed, but records will be kept as to your actual dental specialty.)

Appendix 3
Wisconsin Medicaid Covered Drugs

A. COVERED DRUGS - LEGEND DRUGS

Wisconsin Medicaid uses an Open Formulary for legend drugs with few restrictions. Restrictions include: Drugs Which Require Prior Authorization (refer to Sections C and D below), Noncovered Manufacturer Drugs (refer to Section A of Appendix 4 of this handbook), Less-Than-Effective Drugs (refer to Section B of Appendix 4 of this handbook) and Negative Formulary Drugs (refer to Section C of Appendix 4 of this handbook).

B. COVERED DRUGS - OVER-THE-COUNTER DRUGS

The general categories are:

ANALGESICS-ORAL/RECTAL ANTACIDS ANTIBIOTIC OINTMENTS ANTIFUNGALS-TOPICAL ANTIFUNGALS-VAGINAL BISMUTH SUBSALICYLATE CAPSAICIN CONTRACEPTIVE SUPPLIES	COUGH SYRUPS ² DIPHENHYDRAMINE FERROUS GLUCONATE/ SULFATE FOR PREGNANT WOMEN (AND FOR A 60- DAY PERIOD BEYOND THE END OF THE PREGNANCY)	HYDROCORTISONE PRODUCTS-TOPICAL INSULIN LICE CONTROL PRODUCTS AND PINWORM TREATMENT PRODUCTS	MECLIZINE OPHTHALMIC LUBRICANTS PSEUDOEPHEDRINE PYRIDOXINE TABLETS THERAPEUTIC ORAL ELECTROLYTE REPLACE- MENT SOLUTIONS
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(Note: Coverage is limited to generic drugs for most covered OTC drugs [excluding the OTC product categories of insulin, ophthalmic lubricants, and contraceptive supplies]. Some products in these categories are *not* covered because the manufacturer did not sign a rebate agreement. Examples of noncovered brand name products include Mylanta, Roloids, Clear Tears, Lyteers, Neo Tears, Maaiox, Tiralac, Ecotrin, Robitussin, Tylenol, Ascriptin, Riopan and Advil.)

B. COVERED DRUGS - OVER-THE-COUNTER DRUGS (HealthCheck "Other Services")

Effective with dates of service beginning January 1, 1994, the following drug categories are covered through HealthCheck "Other Services" without prior authorization but with a written prescription, as well as verification that a comprehensive HealthCheck screen occurred within the last year. Pharmacies are required to maintain this documentation. HealthCheck is a preventive health care program for children under the age of 21. Refer to Appendix 25 of the pharmacy handbook for more specific information on covered categories.

ANTI-DIARRHEALS IRON SUPPLEMENTS	LACTASE PRODUCTS LAXATIVES	MULTIVITAMINS	TOPICAL PROTECTANTS
-------------------------------------	-------------------------------	---------------	---------------------

¹ Limited to single entity aspirin, acetaminophen, ibuprofen products only. These analgesics remain in the daily rate for nursing home recipients.

² Covered "cough syrups" are limited to products for treatment of coughs only. Covered products include those containing a single component (terpin hydrate or guaifenesin), a single cough suppressant (codeine or dextromethorphan), or a combination of an expectorant and cough suppressant. Multiple ingredient cough/cold combination products are noncovered.

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Appendix 3
Wisconsin Medicaid Covered Drugs
 (continued)

C. COVERED NON REBATED DRUGS - PRIOR AUTHORIZATION REQUIRED

These drugs require prior authorization because the manufacturer did not sign a rebate agreement. Prescribers are requested to provide a statement regarding the nature of the medical need for these specific brand drugs, as well as a statement which asserts that failure to cover the drug will result in costs to Wisconsin Medicaid which exceed the cost of the drug. This list may change if the manufacturer signs a rebate agreement. Generic equivalents of these drugs are not included in this requirement and may be billed without prior authorization if the generic manufacturer has signed a rebate agreement.

DALMANE LIBRITABS	LIBRIUM MELANEX	MENRIUM QUARZAN	RIMSO 50 VALIUM
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D. COVERED REBATED DRUGS - PRIOR AUTHORIZATION REQUIRED

1. Paper Submission

These drugs are produced by manufacturers which have signed rebate agreements but require prior authorization to determine medical necessity. Diagnosis and information regarding the medical requirements for these drugs must be provided on the prior authorization request.

ALGLUCERASE (11/1/92) Ceredase*	CS III & IV STIMULANTS (Excludes Mazindol) Benzphetamine, Diethylpropion, Fenfluramine, Phendimetrazine, Phentermine	ENTERAL NUTRITIONALS Ensure, Pediasure Meritine, Enrich, MCT Sustacal, Pregestimil, etc. EPOETIN ALFA Epogen,* Procrit*	FERTILITY ENHANCEMENT DRUGS (when used to treat conditions other than infertility) Chorionic Gonadotropin, Menotropins, Clomiphene, Urofollitropin, Gonadorelin
HUMAN GROWTH HORMONE Humatrope,* Protropin* Serostim TM	IMPOTENCE TREATMENT DRUGS (When used for a condition other than impotence) Alprostadil Systemic (Prostin VR Pediatric, Vasoprost), Phentolamine, Systemic (Regitine), Phentolamine Oral (Vasomax), Sildenafil (Viagra)	INTERFERONS Alferon N,* Intron-A,* Infergen, Roferon-A,* Betaseron* (10/01/93) Avonex (07/01/96)	MUIROGIN (02/01/94) Bactroban* MUROMONAB-CD3 Orthoclone OKT3*
HYPERALIMENTATION Total Parenteral Nutrition Peripheral Parenteral Nutrition	UNLISTED/ INVESTIGATIONAL DRUGS Biopterin (tetrahydrobiopterin), Somogard (deslorelin)	WEIGHT LOSS AGENTS Meridia (2/1/98)	

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Appendix 3
Wisconsin Medicaid Covered Drugs
 (continued)

D. COVERED REBATED DRUGS - PRIOR AUTHORIZATION REQUIRED			
2. Specialized Transmission Approval Technology (STAT) PA.			
ORAL ULCER TREATMENT DRUGS (07/01/94) Axid, Carafate, Cytotec, Pepcid, Prilosec, Tagamet, Zantac Prevacid (10/01/95), Tritec (8/26/96), Arthrotec (1/1/98), Prevpac (1/20/98)	SMOKING CESSATION PRODUCTS (07/01/94) Habitrol, ProStep, Zyban (6/23/97) (OTC products not covered.)	COLONY STIMULATING FACTORS (07/01/94) Neupogen, Leukine, Prokine	

* Providers will receive a response within 24 hours from Wisconsin Medicaid for these drug products produced by manufacturers who have signed rebate agreements. Providers must have properly submitted the prior authorization requests.

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Appendix 4

Wisconsin Medicaid Noncovered Drugs

A. Noncovered Drugs - No Manufacturer Rebate Agreement			
Manufacturers of the following drugs have chosen not to participate in the Medicaid program. This is <i>not</i> a complete list of noncovered drugs. This list may change if manufacturers sign rebate agreements. Wisconsin Medicaid does not grant prior authorization for these drugs. Wisconsin Medicaid may cover the generic alternatives for these drugs if the manufacturer signed a rebate agreement. The noncovered drugs are:			
Asthmanephrine Bichloracetic Acid Clear Tears Drysol	Duolube Eppy N Oph Soln Eppy Sol Oph Karidium	Karigel Lyteers Moisture Drops Monoject Insulin Jel	Nafrinse Neo-Tears Tinver Lotion Xerac AC Yodoxin

B. Medicaid Noncovered Drugs - FDA Less-Than-Effective Drugs				
Wisconsin Medicaid does not grant prior authorization for these drugs nor for any generic alternatives identified by the Food and Drug Administration (FDA) as identical, related or similar to these drugs. This list represents only the most commonly prescribed less-than-effective drugs.				
Amesec Arlidin Bellabarb Belladenal Belladenals Butibel Cyclandelate	Deprol Donnatal Donnatal Extentabs Entex Entex Liq Fedrinal Isolate Comp Isoxuprine	Kinesed Levsin W Phenobarb Librax Lufyllin EPG Marax Mepergan Fortis Midrin P. V. Tussin	Mudrane Naldecon Nylidrin Pentaerythritol TN Peritrate Phenobarb & Belladonna Priscoline Quadrinal	Quibron Plus Rautrax Theofed Tigan Oral/rectal Tuss Ornade Vasodilan Vioform W HC Vytone

C. Medicaid Noncovered Drugs - Wisconsin Negative Formulary. Prior Authorization Will Not Be Granted for These Drugs:		
Alginate Gaviscon	Minoxidil Topical Non-rebated Drugs Ineligible for Prior Authorization	Progesterone for PMS Legend Multi-vitamins (Non-prenatal) - Excludes HealthCheck
FERTILITY ENHANCEMENT DRUGS (when used to treat infertility)		
Chorionic Gonadotropin Menotropins Clomiphene	Urofollitroping Gonadorelin	Urethral Suppository (Muse) Yohimbine
IMPOTENCE TREATMENT DRUGS		
Alprostadil Intracavernosal (Caverject, Edex) Phetolamine Intracavernosal (Regitine) Sildenafil (Viagra)		
Any Drug Determined to Be Experimental in Nature or Not Proven as an Effective Treatment for the Condition for Which it Is Prescribed (See HFS 107.035).		